

| POSITION                  | INITIALS | ID NO.    | DATE             |
|---------------------------|----------|-----------|------------------|
| FEE DETERMINATION         |          |           |                  |
| O.I.P.E. CLASSIFIER       |          |           |                  |
| FORMALITY REVIEW          | JK       | 20<br>835 | 1/11<br>01/25/01 |
| RESPONSE FORMALITY REVIEW |          |           |                  |

### INDEX OF CLAIMS

✓ ..... Rejected  
 " ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim          | Date    |
|----------------|---------|
| Final Original |         |
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| Claim          | Date |
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| Claim          | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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